Application or Docket Number: 09 658393

CLAIMS AS FILED - PART I

FOR	NUMBER FILED (Column 1)	NUMBER EXTRA (Column 2)	SMALL ENTITY TYPE ☐ RATE	FEE	OR	OTHER THAN SMALL ENTITY RATE	FEE
BASIC FEE				345.00	OR		690.00
TOTAL CLAIMS	120 minus 20=	100	X$ 9=		OR	X$18=	1800
INDEPENDENT CLAIMS	8 minus 3 =	5	X39=		OR	X78=	396
MULTIPLE DEPENDENT CLAIM PRESENT			+130=		OR	+260=	—
			TOTAL		OR	TOTAL	2880

* If the difference in column 1 is less than zero, enter "0" in column 2

CLAIMS AS AMENDED - PART II

1-4-04

AMENDMENT A

	CLAIMS REMAINING AFTER AMENDMENT (Column 1)	HIGHEST NUMBER PREVIOUSLY PAID FOR (Column 2)	PRESENT EXTRA (Column 3)	SMALL ENTITY RATE	ADDITIONAL FEE	OR	OTHER THAN SMALL ENTITY RATE	ADDITIONAL FEE
Total	24	Minus 100	0	X$ 9=		OR	X$18=	
Independent	5	Minus 9	0	X39=		OR	X78=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM				+130=		OR	+260=	
				TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	

9-20-05

AMENDMENT B

	CLAIMS REMAINING AFTER AMENDMENT (Column 1)	HIGHEST NUMBER PREVIOUSLY PAID FOR (Column 2)	PRESENT EXTRA (Column 3)	SMALL ENTITY RATE	ADDITIONAL FEE	OR	OTHER THAN SMALL ENTITY RATE	ADDITIONAL FEE
Total	21	Minus 120	0	X$ 9=		OR	X$18=	
Independent	5	Minus 8	0	X39=		OR	X78=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM				+130=		OR	+260=	
				TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	

AMENDMENT C

	CLAIMS REMAINING AFTER AMENDMENT (Column 1)	HIGHEST NUMBER PREVIOUSLY PAID FOR (Column 2)	PRESENT EXTRA (Column 3)	SMALL ENTITY RATE	ADDITIONAL FEE	OR	OTHER THAN SMALL ENTITY RATE	ADDITIONAL FEE
Total		Minus		X$ 9=		OR	X$18=	
Independent		Minus		X39=		OR	X78=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM				+130=		OR	+260=	
				TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	

* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."
*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."
The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.